APPLICATION FOR UNITED STATES PATENT DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name; that

I verily believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

FI FC	FROSTATIC	GROUNDING FOR	DRUM MAINTEN	ANCE UNIT	ſ.
-------	-----------	----------------------	--------------	-----------	----

described and claimed in the specification:
Check one
*a. attached hereto.
b filed on as Application No. and amended on (if applicable).
I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims,
as amended by any amendment referred to above.
I acknowledge the duty to disclose to the Office all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations, §1.56. Under Title 35, U.S. Code §119, the priority benefits of the following foreign application(s) and/or United States provisional application(s) filed by me or my legal representatives or assigns within one year prior to this application are hereby claimed:

The following application(s) for patent or inventor's certificate on this invention were filed in countries foreign to the United States of America either (a) more than one year prior to this application, or (b) before the filing date of the above-named foreign priority application(s) and/or United States provisional application(s):

I hereby appoint the following as my attorneys of record with full power of substitution and revocation to prosecute this application and to transact all business in the Patent Office:

Mark Costello Ronald F. Chapuran Kevin R. Kepner Nola Mae McBain James A. Oliff William P. Berridge Kirk M. Hudson Thomas J. Pardini Edward P. Walker Robert A. Miller Reg. No. 31,342; Reg. No. 26,402; Reg. No. 32,145; Reg. No. 35,782; Reg. No. 37,075; Reg. No. 30,024; Reg. No. 30,024; Reg. No. 30,411; Reg. No. 31,450; Reg. No. 32,771;	Elizabeth F. Harasek Eugene O. Palazzo Mario A. Costantino Stephen J. Roe Joel S. Armstrong Christopher W. Brown Richard E. Rice Paul Tsou Eric D. Morehouse	Reg. No. 28,850; Reg. No. 20,881; Reg. No. 33,565; Reg. No. 34,463; Reg. No. 36,430; Reg. No. 38,025; Reg. No. 31,560; Reg. No. 37,956; and Reg. No. 38,565.
--	--	--

ALL CORRESPONDENCE IN CONNECTION WITH THIS APPLICATION SHOULD BE SENT TO OLIFF & BERRIDGE, PLC, P.O. BOX 19928, ALEXANDRIA, VIRGINIA 22320, TELEPHONE (703) 836-6400.

I hereby declare that I have reviewed and understand the contents of this Declaration, and that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

1	Typewritten Fu of First or Sole	ll Name Inventor	Gerard	Н.	Rousseau
	•		Given Name	Middle Initial	Family Name
2	**INVENTOR	'S SIGNATURE:	Hou	East	
2	**DATE OF S	SIGNATURE:	19	16	/ 03
3	""DATE OF SIGNATURE.		Month	Day	Year
	Residence:	Portland		OR	USA
	Residence.	City	State	e or Province	Country
	Citizenship:	France			
	Post Office Address: (Insert complete		10436 NW Sichel Cou	urt, Portland, OR 97229	
		mailing address, including country)	USA Gradien Grade	ding claims) at the end the	reaf if Roy a is checked

^{*}This form may be executed only when attached to the specification (including claims) at the end thereof if Box a. is checked.

^{**}Note to Inventor: Please sign name exactly as it appears above and insert actual date of signing.

Page 2 OF U.S.A. DECLARATION FORM (Discard this page in a sole inventor application)

	Typewritten Fu	ill Name			
	of Second Joint Inventor (if any)		Ernest	<u>I.</u>	Esplin
	-		Given Name	Middle Initial	Family Name
	**INVENTOR'S SIGNATURE:		Enur	/ Land o	~
			12	18	2003
	**DATE OF SIGNATURE:		Month	Day	Year
		O1		DR	USA
	Residence:	Sheridan			
		City	State or Province		Country
	Citizenship:	USA			
		Post Office Address:	P.O. Box 278, Sheridan, OR 97378		
		(Insert complete			
		mailing address,	19105 Rock Creek Road, Sheridan, OR 97378		
	including country)		19103 Rock Creek Road, Sheridall, OR 97376		
	Typewritten Fi		Kelly		Kessler
	of Third Joint Inventor (if any)		Given Name	Middle Initial	Family Name
			C/AA/A		
	**INVENTO	R'S SIGNATURE:	Kelly Lissen		
	**DATE OF S	SIGNATURE:	12	16	2003
			Month	Day	Year
	Residence:	Wilsonville	(OR	USA
	Residence.	City	State or Province		Country
	1 .	USA			
	Citizenship: USA Post Office Address:				
		(Insert complete	8411 SW Jessica Street, Apt. 1508		
	mailing address,		0111 011 0000100 20100		
	including country)		Wilsonville, OR 9707	70	
	Typewritten Full Name of Fourth Joint Inventor (if any)				
			Given Name	Middle Initial	Family Name
	**INVENTO	R'S SIGNATURE:			
	**DATE OF	SIGNATURE:	Month	Day	Year
			147011111	,	
	Residence:		C4-44 A	- Descripes	Country
	City		State or Province		Country
	Citizenship:				
		Post Office Address:			
		(Insert complete			
		mailing address,			
	Tom assert as E.	including country)			
	Typewritten Full Name of Fifth Joint Inventor (if any)				
	oj rijin Joini l	nventur (y uny)	Given Name	Middle Initial	Family Name
			WAY T WAS A TOWNSHIP		•
:	**INVENTO	R'S SIGNATURE:			
3	**DATE OF S	SIGNATURE:			
			Month	Day	Year
	Residence:				
		City	Sta	te or Province	Country
	Citizenship:				
	Citizoniinpi	Post Office Address:			
		(Insert complete			
		mailing address,			
		including country)			

specification (including claims) of the application to which it pertains.

^{**}Note to Inventors: Please sign name exactly as it appears and insert the actual date of signing.

This form may be executed only when attached to the first page of the Declaration and Power of Attorney form and the